

**EXHIBIT
A**U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**
See "Instructions for Service of Process by U.S. Marshal"

| | |
|------------------------------------------|--------------------------------------------------|
| PLAINTIFF United States of America | COURT CASE NUMBER 8:15-cr-320-T-23TGW |
| DEFENDANT PRISCILLA ANN ELLIS, et al. | TYPE OF PROCESS Execution of SW/Check Deposit |

| | |
|---------------------|--------------------------------------------------------------------------------------------------------|
| SERVE AT | NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN |
| | ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) |

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Holly G. Gershow, AUSA
U.S. Attorney's Office
400 North Tampa Street, Suite 3200
Tampa, Florida 33602

Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.

2015 OCT -7 AM 9:52
U.S. MARSHAL SERVICE
MIDDLE DISTRICT OF FLORIDA
TAMPA

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

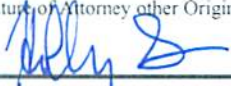
Fold

Fold

Pursuant to the execution of the seizure warrant, please deposit \$7,083.08 in funds seized from Capital One Bank account number 1360626950.

CATS ID: 15-FBI-005312

Signature of Attorney other Originator requesting service on behalf of:



☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

(813) 274-6000

DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

| | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) | Total Process <u>1</u> | District of Origin No. <u>18</u> | District to Serve No. <u>18</u> | Signature of Authorized USMS Deputy or Clerk  | Date <u>10/7/15</u> |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------|

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 11/4/2015 Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy



| | | | | | |
|-------------|-------------------------------------------|----------------|---------------|------------------|-----------------------------------------------------|
| Service Fee | Total Mileage Charges including endeavors | Forwarding Fee | Total Charges | Advance Deposits | Amount owed to U.S. Marshal* or (Amount of Refund*) |
| | | | | | \$0.00 |

REMARKS \$7,083.08 USC deposited on 10/9/15.**DISTRIBUTE TO:**

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 11/13

App. 001